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ABSTRACT

Module 2 of a seven mcdule package for child protective service workers explores various types of parent aide programs for abused and neglected children and their families. Four training activities address mcdels of parent aide programs, crganization analysis, and selection of the appropriate program model. Included are directions for using the media package and questions for discussion. (SBH)

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Module 2

Program Models — Which One Is Right For You?

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IP

Austin, 1979

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Program Models — Which One Is Right For You?

"There was a traveling saleswoman who stopped at a farmhouse and asked for lodging for the night. The farmer said he'd think about it and then introduced the saleswoman to his nine sons.

"This is going to be an interesting evening," said the saleswoman, smiling at each of the sons. "Your sons are *all* so handsome."

"Interesting, hogwash!," exclaimed the farmer, "you get right back in your car and get out of here."

"Why?," cried the saleswoman.

"We got work to do here, Ma'm, and the last thing we can afford is a saleswoman who can't make up her mind!"

Traveling Salesperson Jokes

Overview

Decisions are often difficult to make, especially when all of the alternatives look good. Often the most challenging part of developing a new program is choosing which ideas and plans to include and which to omit.

For instance, it would be extremely rewarding to design a parent aide program that:

- provides services to high risk parents to prevent abuse and to already-abusive parents to eliminate abuse;
- supplies a therapeutic nursery for the younger victims of abuse as well as counseling for older children;
- is a community-based program yet keeps the major control (for its governance) within protective services; and
- sponsors Parents Anonymous groups and has a crisis hotline and a crisis nursery.

Unfortunately, no one has designed or carried out such a comprehensive program yet.

How can we whittle our expectations down to manageable size? Experienced program planners try to learn what they can about existing programs in order to fully understand all of their alternatives. They combine the knowledge they gain from other programs with their own program goals to assess the best program models for them to use as a design. This module provides the framework for you to go through the same program planning steps.

Outcomes

When you finish this module you will have:

1. learned about a variety of parent aide programs
2. answered questions to help you analyze your own organization
3. described the program model which appears to best fit your needs

Activities

1. The Visit
2. Lingering
3. A Look Within
4. The Reckoning

The Visit

"Oh, do not ask, 'What is it?" Let us go and make our visit."
T.S. Eliot

Discussion

The purpose of this activity is to gather information about other programs so you can begin building your own. The two programs you are about to see in the sound/slide production *Two Programs — A Visit* graciously allowed us into their daily routines and answered many questions so we might show you their inner workings.

As you view and discuss, you will begin to form the framework for your program by incorporating some aspects of the programs you see, and rejecting others. After presenting the first program, there will be an intermission which is designed to help you consider what you have seen and consolidate your impressions while they are still fresh. Remember that each of these programs was designed to fulfill the unique requirements of the geographic location, clients and resources.

Directions

Watch the sound/slide presentation *Two Programs — A Visit.* At the intermission, answer the questions on the Family Outreach Questions page. Then complete the second half of the sound/slide presentation and answer the questions on the Travis County Lay Therapy page. When you have completed these questions, move on to Activity 2.

Family Outreach Questions

Directions

As a group, answer these questions. Then view Part II of the *Two Programs — A Visit.*

1. List the tasks and responsibilities of the paid staff workers.

2. List the tasks and responsibilities of the volunteers.

3. What are some of the constraints/benefits of the organizational affiliation? (how the volunteer program fits into the larger organization)

4. What are some of the constraints/benefits of the *internal* organizational structure of the program? (i.e., who is reponsible to whom; how duties are allocated)

5. What would you describe as the major goal? The major client group?

6. What aspects of the Family Outreach program seem most important or most applicable to your own program?

Travis County Lay Therapy Questions

Directions

As a group, answer these questions. Then move on to Activity 2, "Lingering".

1. List the tasks and reponsibilities of the paid staff workers.

2. List the tasks and responsibilities of the parent aides.

3. What are some of the constraints/benefits of the organizational affiliation? (how the volunteer program fits into the larger organization)

4. What are some of the constraints/benefits of the *internal* organizational structure of the program? (i.e., who is responsible to whom; how duties are allocated)

5. What would you describe as the major goal? The major client group?

6. What aspects of the Travis County Lay Therapy program seem most important or most applicable to your own program?

Lingering

"Nature never makes haste; her seasons revolve at an even pace. The buds swell imperceptibly, without hurry or confusion, as though the short spring days were an eternity."

Thoreau

Discussion

Like nature, let us linger a while at our task and spend time with a few more programs before we move on. Short written descriptions of five programs begin on the next page. While reading these, notice the diversity of program models that can enhance your perspectives for the discussion of program goals and organization.

Directions

Read over the descriptions of the five programs. Organization alternatives which may be of interest to you are in italic lettering. Use the "Notesheet — Five Additional Models" to jot down ideas or procedures or goals which appeal to you. When you have finished, move on to Activity 3.

NOTESHEET

Five Additional Models

Note any aspects of these models which seem important or applicable to your own program.

SCAN of Arkansas

_____

_____

_____

Operation Reach — Wyoming People Reaching out to Help Their Abused and Neglected Children

_____

_____

_____

Brownwood Volunteer Program

_____

_____

_____

The SCAN Center of Spokane County

_____

_____

_____

Project Children: A Rural Child Abuse/Neglect Program

SCAN of Arkansas

SCAN (Suspected Cases of Child Abuse and Neglect) of Arkansas is a *private corporation* that is largely *funded through a Title XX contract* with *Arkansas Social Services.* It provides services to families with an abuse problem who have children *12 years old or younger.*

SCAN uses *both* a *professional* and a *volunteer* staff to provide all services to cases of abuse, while *Arkansas Social Services deals with neglect cases, older children,* and the *foster care program.*

SCAN began in the early 70's through the efforts of a *few volunteers,* especially those of Sharon Pallone, the present Executive Director, who became committed to providing intensive services to abusive parents and their children. The efforts of these few volunteers eventually resulted in the development of an agency that now has over 300 volunteers and serves abused children and their families in *15 counties* in Arkansas.

Although SCAN is a *separate agency* and therefore somewhat autonomous, *coordination with the state social services agency is ongoing* not only through *contract monitoring,* but also through *referral screening processes* and the state-operated foster care/adoption program.

At SCAN, *professional staff receive and evaluate referrals, recruit* and *train volunteers,* and *administer* the agency. *Volunteers provide ongoing services* to clients using the effective treatment modality that has been developed in this program. *Group and individual support to both professional and volunteer staff has been emphasized* in SCAN as being crucial to the effectiveness of the program.

For more information contact:
Sharon Pallone, Director
SCAN Services
Hendrix Hall
4313 West Markham
Little Rock, Arkansas 72201

(501) 371-2777

Operation Reach — Wyoming People Reaching Out to Help Their Abused and Neglected Children

> "There's a belief in America, as old as the nation itself, that if a job has to be done, go to the people. Explain, honestly, to them why the job must be done. Tell them what is needed. Make suggestions as to how they might proceed. Offer your help. Then step back and turn it over to them. The people will get the job done."

Janet Shriner, a child protection specialist with the Wyoming Division of Public Assistance and Social Services, and Andy Ruskanen, public information officer with the Wyoming Department of Health and Social Services, initiated this program after discussing the startling increase in the child abuse/neglect rate in 1974.

They agreed that "solutions should be sought that would aim toward *community-based preventive efforts* rather than traditional state agency-centered, treatment-after-the-fact programs. They agreed the job would require:

"1. *The full-time effort of one person* placed in selected communities for relatively short periods of time;
2. That the person's efforts would be geared strictly toward *introducing new or improving existing programs* for preventing abuse/neglect which community residents, themselves, believed to be of value;
3. That *long-range efforts would have to be assumed by citizens not traditionally involved in abuse/neglect prevention* programs. Though professional workers would not be excluded, a primary goal was to involve more people in the prevention of abuse/neglect rather than adding to the burden of people already involved in dealing with the program."

In 1976, a $13,000 *grant* was obtained *from the Wyoming Department of Health and Social Services* through the Office of Child Development, Region VIII, DHEW. The program specialist for child protection with that agency 'went to bat' for the project and helped assure this funding. A project manager was hired who, over a seven month period, worked with three rural community programs helping them to develop their own resources. *The project manager did this by moving into the community, meeting with community groups, and assisting them in developing their own solutions.* Two of the community programs instituted parent aide projects.

For more information contact:
Janet Shriner, Social Services Consultant
Division of Public Assistance and Social Services
Hathaway Building
Cheyenne, Wyoming 82002

Brownwood Volunteer Program

Housed in the Protective Services Division of the Brownwood, Texas, regional office, this program uses *Title IV-B* funds to hire a Volunteer Coordinator. *This full-time coordinator recruits and trains volunteers.*

Caseworkers have the option to request volunteer assistance with cases. These requests are submitted to the Volunteer Coordinator or the Supervisor. The Volunteer Coordinator and Supervisor then decide whether a volunteer should be assigned to a case. The Volunteer Coordinator presents the volunteers with a choice of cases, letting them select one in which they are interested.

The roles of the volunteers in this program have been gradually changing from 'traditional' volunteer roles (such as transportation) to more innovative roles. As of now, some volunteers function as parent aides in neglect cases. Volunteers have lesser roles in verified abuse cases.

For more information contact:
Gary L. Bailey, Protective Services Supervisor
3805 Glenwood
Brownwood, Texas 76801

(915) 643-2571

The SCAN Center of Spokane County

The SCAN Center in Spokane, Washington, was founded by the Child Abuse Project Steering Committee. This Steering Committee was structured on the basis of the conviction that child abuse is a medical-legal-social problem. Therefore, when it was formed, representatives from the medical community, the legal community, and the social services community met together to study the child abuse problem.

"During the research phase, the Steering Committee investigated innovative child abuse and neglect programs in operation in Boston, Honolulu, New Haven, St. Paul, and Denver. The research indicated that these programs were university-hospital based. Since Spokane does not have such a facility, another approach was taken and a community-based operation was planned. By-laws were developed and articles of incorporation for the SCAN Center of Spokane County were filed in July, 1973."

SCAN of Spokane, a *non-profit corporation*, provides services aimed at the *prevention, diagnosis* and *treatment* of child abuse and neglect. A *nineteen-person Board of Directors* which is comprised of business people, professionals, and private citizens governs the Center. The parent aide program represents one service they provide. Other services include a speaker's bureau, resource center, an assessment team, and Parents Anonymous. The program is *funded* through the *United Way* and *private donations*.

For more information contact:
The SCAN Center of Spokane County
South Center Medical Building
Sacred Heart Medical Center
Spokane, Washington 99204

(509) 455-4700

Project Children: A Rural Child Abuse/Neglect Program

In the fall of 1971, a regional child abuse prevention effort began in Bartholomew County, Columbus, with the involvement of a volunteer with an abusive family. The involvement and concern for this family developed over the following months, and exposed the lack of services in the areas of child abuse and neglect.

After a period of becoming knowledgeable in the areas of child abuse and neglect, speaking to organizations and groups, and *creating community concern*, the volunteer organized a group of professionals, who in March, 1974, met to form what is now the Bartholomew County Child Abuse Council. This initial effort fostered additional child abuse councils in Brown, Decatur, Jackson, and Jennings Counties. Because of the regional scope that the program was taking, Quinco Consulting Center assumed responsibility for the *coordination* and *funding* of the child abuse and neglect program by inserting the position of *program coordinator* into a Children's Services federal grant application. (Quinco Consulting Center is a comprehensive mental health facility which serves the previously-mentioned five counties.) The selection of the coordinator was a five county cooperative effort, and was achieved in November, 1974.

Approximately six months after the initiation of this program, the need for a volunteer component was identified. The parent aide volunteer evolved because of a need. In our *rural area*, as is true in many other areas, the lack of available staff, the lack of time to devote to the abusive family — when time is indicated, and the threat that is imposed by the Department of Public Welfare with regard to removal of the child, all indicated the need for an alternative method of providing services to the abusive and neglecting parent.

The purpose of Project Children is to help parents learn to deal with their problems in a way that results in non-abusive and non-neglecting behavior toward their children and improved family functioning with an intact, healthier, happier family unit.

Goals:

A. To develop a *multi-disciplinary approach* for the prevention, detection, and treatment of child abuse and neglect;
B. To *increase community awareness*, concern and support through education;
C. To facilitate the delivery of *comprehensive services* to abuse and neglect clients;
D. To stimulate the *development of new treatment resources* for identified abuse/neglect clients and potential children-at-risk;
E. To *develop training programs for the professional community* in the areas of identification and treatment of child abuse and neglect;
F. To *develop a child abuse/neglect program model* that can be *replicated* in other areas.

For more information contact:
Thomas R. Sefcik
Coordinator, Project Children
Quinco Consulting Center
2075 Lincoln Park Drive
Columbus, Indiana 47201

(812) 379-2341

A Look Within

"To thine own self be true" — Shakespeare

Discussion

To choose a program model which fits your needs, it is necessary to examine the programs available, and yourself — the agency and the community in which you work. Certain program components will fit more effectively into one type of organization and community than another. For example, if you would like volunteers to be responsible for their own recruitment and screening (as they are in the Family Outreach model), you would probably want to seek out an established *group* of volunteers to work with, rather than recruiting volunteers individually. And, if your community has no established volunteer group currently available to work with you, this program component might be somewhat more difficult to implement.

When beginning a new program, it is generally wise not to try to scale the most difficult peaks all at one time. Therefore, having volunteers responsible for their own recruitment and screening may not be the most practical *immediate* goal for all programs.

This activity is designed to help you assess your own situation so you can make more knowledgeable choices about what type of program (or program elements) would fit most effectively into your organization.

Directions

Look over the Organizational Analysis questions and decide whether you would like to answer them individually or as a group. Then answer the questions by writing your answers in the space provided. When you are finished, read the Organizational Analysis that follows and move on to Activity 4.

Organizational Analysis

1. Support for volunteer programs at the Program Director and Regional Administrator level is:
   (circle one) High Moderate Low
2. The number of well-organized voluntary groups in your community which might be interested in collaborating on a child abuse and/or neglect project is:
   High Moderate Low
   List the names of voluntary groups with which you might work:

3. Staff members would probably be willing to put in extra hours in order to have more complete ownership of the volunteer component.
   Yes No
4. There are a number of organizations in town which might be able to assist with funding a volunteer program.
   Yes No
   List the names of the organizations:

5. Staff would be willing to have volunteers eventually make major decisions — such as how volunteers will be screened and trained or how cases will be handled.
   Yes No
6. There are currently people on your staff who would be capable and willing to lead the volunteer program in addition to regular duties.
   Yes No
7. Your staff would be willing to work on an equal basis with a volunteer organization.
   Yes No
8. Does your staff now have someone 'on board' who might be willing to take on the job of coordinating with a volunteer agency? This means separation from the DHR 'mainstream.'
   Yes No
9. Can your staff work well together as a team?
   Yes No
10. From your perspective, does your community have a greater need for a preventive program than one which deals with validated cases?
    Yes No

When you have finished responding to these questions, look at the comments on the next page.

Organizational Analysis — Discussion

There are no 'right' or 'wrong' answers to the questions you just answered. A 'Yes' or 'No' answer in certain areas may indicate that one type of volunteer program model has a better chance for success in your organization than another.

Remember that none of the programs (about 20) we studied to develop this curriculum package began under ideal conditions. Far from it. Most, it seems, faced heavy odds and succeeded because of the commitment of a small group of people (in some cases, only one person). Thus, if in answering these questions you begin to think that one type of model would not work in your organization, don't be discouraged.

1. Is support for volunteer programs at the Program Director and Regional Administrator level high, moderate, or low?

If you feel that administrative support is high, you could implement any type of program. If, however, it is low, you might do better to cooperate with a community agency to implement your volunteer program. Why? Because each year program directors and other administrators must determine their budgets and decide which of the many worthy programs they direct will be funded for another year. This is a difficult decision for administrators, and priorities are often suggested by the state and federal governments. It takes real commitment on the part of an administrator to keep a program going year after year.

Combining with a community agency, such as a mental health center or a hospital, or working with a community service program such as the Junior League or National Council of Jewish Women, can give you a wider base of support. Other groups may also add manpower and financial support.

2. Is the number of well-organized voluntary groups in your community which might be interested in collaborating on a child abuse and/or neglect project high, moderate, or low?

The Family Outreach type of model usually needs a well-organized volunteer community group to keep it going. Typically, these groups have been well established for a number of years with specific goals. One Family Outreach program was started by DHR

staff working with a newly-formed coalition of community agencies and ran into difficulties. The good will and intent were there, but the well-oiled machinery necessary to maintain programs as complex as a parent aide program was not.

3. Would staff members probably be willing to put in extra hours in order to have more complete ownership of the volunteer component?

Programs housed within protective services agencies, such as Family Focus and Travis County Lay Therapy, require a considerable amount of extra work on the part of staff members. In both of these programs, staff work late hours to keep their volunteer programs going. The extra work often comes in waves, during the recruiting and training of a new group of volunteers, for example, and subsides to a more normal work load during other periods.

4. Are there a number of organizations in town which might be able to assist with funding a volunteer program?

Programs which move out of the DHR organization must be prepared to face funding issues directly. SCAN of Spokane, Washington, mentioned in Activity 1, for instance, obtains its funds from United Way, 10 private organizations (foundations, societies, corporations) and 20 'other donations.' This requires a great deal of fund-raising activity.

5. Would staff be willing to have volunteers eventually make major decisions — such as how volunteers will be screened and trained or how cases will be handled?

Although many programs have volunteers who work on an equal basis with staff, many others do not. The Phoenix Parent Aide Project, for instance, has a clearly-defined role for parent aides which does not include major decison-making. It is easier to delimit the volunteers' roles when they are not partners in such activities as fund raising or initial organization of the program.

6. Are there currently people on your staff who would be capable and willing to lead the volunteer program in addition to regular duties?

Successful programs within DHR are frequently (not always) led by someone who is already 'on board,' who has the respect of peers, and who is willing to take on addtional work responsibilities. This minimizes staff resistance and helps to assure that the volunteer component will receive enough case referrals to keep it alive. Programs that are started by coalitions of groups (Operation Reach, SCAN of Spokane) often bring in coordinators to run the program.

7. Would your staff be willing to work on an equal basis with a volunteer organization?

A volunteer service group could be a very useful ally in starting a parent aide program. Deborah Butler, the Supervisor of Family Outreach Programs in Dallas, reports that Family Outreach organizations contributed approximately $60,453 in volunteer staff time, volunteer travel, and volunteer trainer time to Family Outreach efforts during 1977. Volunteers were active in recruitment, training, and telephone intake, as well as community education, parenting classes, and recruitment of foster and adoptive homes. However, the managing board of the Family Outreach organizations may or may not make decisions which exactly match the goals or expectations of the parent organizations. This can lead to negotiations in which the volunteer organization must be treated with serious respect.

8. Does your staff now have someone 'on board' who might be willing to take on the job of coordinating with a volunteer agency?

Any program which involves more than one agency means coordination. This, of course, means extra time, and, it may mean misunderstanding. The more agencies involved, the better a communication facilitator the coordinating person needs to be.

9. Can your staff work well together as a team?

Putting together a new program which will operate out of your organization necessitates teamwork. Generally this means spending a lot of time together and trying to create a supportive atmosphere. Teamwork and comraderie can develop as the project grows — always the staff members need to be aware of the importance of working as a team. Strong opposition to such a team effort could make a Family Focus or Travis County Lay Therapy program difficult to implement.

10. From your perspective, does your community have a greater need for a preventive program than one which deals with validated cases?

Virtually any type of model can accomodate a preventive or validated case focus. This decision needs to be made based on your own needs. Travis County Lay Therapy considered the possibility of working with high risk families, but decided that the large number of validated cases that were not receiving intensive services was a higher priority.

The Reckoning

"I stood tall and through it all I did it my way."

Discussion

You have completed a look within, and you have explored some of the program options available to you. Now is a time for the reckoning. A reckoning is a counting up, an evaluation of options. This activity is designed to help you summarize and make decisions about which type of program would work for you.

Directions

1. Working at a chalkboard or on large newsprint sheets, post a list of those aspects of Family Outreach or Travis County Lay Therapy which seem most important (refer to number 6 on the question sheet). Add to that any aspects of the five other programs which seem useful to you (refer to your Notesheet).
2. Based on your self analysis, eliminate those program aspects which would not be practical for you to implement at this time. Cross them off your list.
3. Look at the ideas or approaches that remain. Discuss them, further eliminating any which do not fit into your philosophy.
4. Using the remaining ideas as a guideline, write a one page narrative description of your program, including answers to these questions:
   - A. After which other program (if any) will you model your program? How will you go about learning more about this program?
   - B. Will you co-plan your program with a volunteer organization or recruit volunteers after the planning is completed?
   - C. Will your program be housed within a DHR unit?
   - D. Who should be involved in any further planning of your program (DHR, volunteers, community agencies)?
   - E. Will you work with validated or preventive cases?

Description Of Our Program

Directions

Write the narrative description of your program here.

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Module 2

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